

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Defend Louisiana PAC			FEC IDENTIFICATION NUMBER ▼ C C00616128		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div></div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div>					
Full Name of Payee The Campaign Network			Date of Public Distribution/Dissemination <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div></div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> 11 / 04 / 2016</div>		
Mailing Address 140 Bayswater Street			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">28553.20</div>		
City Boston State MA Zip Code 02128		Transaction ID : SE.4361 Date of Disbursement or Obligation <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div></div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> 11 / 04 / 2016</div>			
Purpose of Expenditure Mail production and postage		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>			
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: LA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">304643.72</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div></div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div>		
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
City State Zip Code		Date of Disbursement or Obligation <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div></div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div>			
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"></div>			
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px;">28553.20</div> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px;">28553.20</div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Townsend, Taylor, ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div></div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> 11 / 04 / 2016 </div>		